

## Memorandum

### DEPARTMENT OF VETERANS AFFAIRS

Date: \_\_\_\_\_

From: Director, Research Operations (151)

To: Mary Medbery/ WOC Employees or VA Employees

Subj: Research Access Card Issuance

1. Access Card issued to:

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SERVICE LINE: \_\_\_\_\_

PI/SUPERVISOR: \_\_\_\_\_

PURPOSE: \_\_\_\_\_

☐ WOC EMPLOYEE      ☐ VA EMPLOYEE      ☐ OTHER: \_\_\_\_\_

2. I understand that I am responsible for the Research Access Card issued and that at the end of my appointment or when I no longer need access to the area, I will return it. **Failure to do so may result in notification to VA Police and processing for theft of government property.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

WOC Cleared: \_\_\_\_\_

\_\_\_\_\_  
Ashley Scales, PhD, MPH

VA FORM 2105

MAR 1989

BioSafety Training \_\_\_\_\_

BioSecurity Training \_\_\_\_\_

Security Trainings \_\_\_\_\_

Background Check \_\_\_\_\_